

COMBINED DECLARATION AND POWER OF ATTORNEY

ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: Original

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ACTIVE PIXEL SENSOR ARRAY RESET

SPECIFICATION IDENTIFICATION

the specification of which:

■ is attached hereto.

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. § 1.56(a).

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

Country	Application No.	Date of Filing dd/mm/yyyy	Priority Claimed Under 37 USC 119
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ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

Country	Application No.	Date of Filing
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I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status (patented, pending, abandoned)
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POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (*List name(s) and registration number(s)*)

Oliver W. Hayes, Registration No. 15,867
Norman P. Soloway, Registration No. 24,315
William O. Hennessey, Registration No. 32,032
Susan H. Hage, Registration No. 29,646
Steven J. Grossman, Registration No. 35,001
~~Christopher K. Gagne, Registration No. 36,142~~

- Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:

Hayes, Soloway, Hennessey & Hage
175 Canal Street
Manchester, New Hampshire
U.S.A. 03101

DIRECT TELEPHONE CALLS TO:
(*Name and telephone number*)

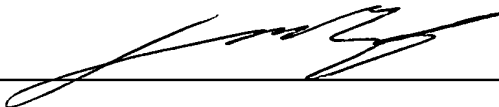
Norman P. Soloway
(603) 668-1400

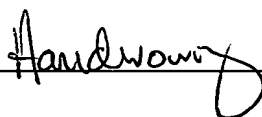
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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE (s)

Full name of 1st inventor: **HUA, Paul**
Country of Citizenship: **People's Republic of China**
Residence Address: **308-58 Bayshore Drive, Nepean, Ontario, K2B 6M9, CANADA**
Post Office Address: **Same as Residence Address**
Date: July 12/00 Signature: 

Full name of 2nd inventor: **HAUDEROWICZ, Peter**
Country of Citizenship: **Canada**
Residence Address: **210 Blackburn Avenue, Ottawa, Ontario, K1N 8A8, Canada**
Post Office Address: **Same as Residence Address**
Date: July 12/00 Signature: 

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

☒ In re application of: **Paul HUA; and Peter HAUDEROWICZ**

Serial No.:

Group No.:

Filed:

Examiner:

For*: **ACTIVE PIXEL SENSOR ARRAY RESET**

☐ Patent No.: Issued:

**NOTE: Insert name(s) of inventor(s) and title also for patent. Where statement is with respect to a maintenance fee payment also insert application serial number and filing date and add Box M. Fee to address.*

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(c-f) AND 1.27(b-d))**

With respect to the invention described in

- ☒ the specification filed herewith.
- ☐ application serial no. _____, filed _____
- ☐ patent no. _____, issued _____

I. IDENTIFICATION OF DECLARANT AND RIGHTS AS A SMALL ENTITY

I hereby declare that I am

(complete either (a), (b), (c) or (d) below):

(a) Independent Inventor

- ☐ a below named independent inventor and that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code to the Patent and Trademark Office.

(b) Non-inventor Supporting a Claim by Another

- ☐ making this verified statement to support a claim by _____

for a small entity status for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code and I hereby declare that I would qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under 41(a) and (b) of Title 35, United States Code, if I had made the above identified invention.

(c) **Small Business Concern**

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

Name of Concern Semiconductor Insights Inc.

Address of Concern 3000 Solandt Road, Kanata, Ontario, K2K 2X2, CANADA

_____ and that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of the Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

(d) **Non-Profit Organization**

- ☐ an official empowered to act on behalf of the non-profit organization identified below:

NAME OF ORGANIZATION _____

ADDRESS OF ORGANIZATION _____

TYPE OF ORGANIZATION

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGH EDUCATION
☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3))
☐ NON-PROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)
☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) and 501(c) (3)) IF LOCATED IN THE UNITED STATES OF AMERICA
☐ WOULD QUALIFY AS NON-PROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE _____)
(CITATION OF STATUTE _____)

and that the non-profit organization identified above qualifies as a non-profit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code.

II. OWNERSHIP OF INVENTION BY DECLARANT

I hereby declare that rights under contract or law remain with and/or have been conveyed to the above identified

☐ person
(item (a) or (b) above)

☒ concern
(item (c) above)

☐ organization
(item (d) above)

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a non-profit organization under 37 CFR 1.9(e).

- ☐ no such person, concern, or organization
☐ person, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME _____
ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Non-Profit Organization

FULL NAME _____
ADDRESS _____

☐ Individual ☐ Small Business Concern ☐ Non-Profit Organization

III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

IV. DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

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V. SIGNATURES

(complete only (e) or (f) below)

(e)

Note: All inventors must sign the verified statement

Name of Inventor

Signature of Inventor

Date

or

(f)

Note: The title of the person signing on behalf of a concern or non-profit organization should be specified.

NAME OF PERSON SIGNING _____

TITLE OF PERSON _____

DOLG SMEATON
PRES. & C.E.O.

(if signing on behalf of a concern or non-profit organization)

ADDRESS OF PERSON SIGNING _____

1526 MONAGHAN LANE
KANATA, ONTARIO

SIGNATURE _____

DATE _____

[Signature]

JULY 13/00

09617564-071700